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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

NONE O.A.

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE O.A.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged 01/29/01 Allowance Examiner's Signature Initials	GA	6	41	7

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## TITLE

INTEGRATED TONE-BASED AND VOICE-BASED TELEPHONE USER INTERFACE

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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